12030824704

STATEMENT OF

RECEIVED

FORM 1		ORGANIZATION				UL -2 AM 10: 35		
NAME OF COMMITTEE (in	n full)	(Check if name is changed)		mple:If typing, type the lines.				
[1,N,D,O,-,A,N	LERICA	N DEMOC	RAT	CORGAN	J112AT	1,0,1		
		1 1 1 1 1						
ADDRESS (number a	nd street)	0,2,6, No.R.	T. H.	JAIN N. D. A. L. E	E AVE			
(Check if a	ddress L							
is changed)	<u>د</u>	SKUKIE [6,0,0,7,6]-						
			CITY		STATE	ZIP CODE		
COMMITTEE'S E-MA	AIL ADDRESS (P	lease provide only one	e-mail ad	dress)				
(Obs1-16	<u>S</u>	chaju, d, 7,3,	409	niail.acm	111			
(Check if is change	address		ر للل					
COMMITTEE'S WEB	PAGE ADDRES	S (URL)						
	IN	NWiladon	٥، ٢، ٩	11111	1 1 1 1 1			
(Check if is change	address							
2. DATE	1 01	20,1,2				•		
3. FEC IDENTIFICATION NUMBER								
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)								
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.								
Type or Print Name of Treasurer SEAN CHAUDHURI								
Signature of Treasure	er	<i>JU</i>	2_		Date 0	5 01 20 12		
NOTE: Submission of		or incomplete information				to the penalties of 2 U.S.C. §437g.		
Office Use Only				For further Information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)		

, I	FEC Fo	rm 1 (Revised 02/2009)	Page 2		
TYPE OF COMMITTEE					
Candidate Committee:					
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate		
Name Cand					
	lidate Affiliati	on Office Sought: House Senate President	State		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Cand					
Part	ty Con	nmittee:			
(d)	这		(Democratic, Republican, etc.) Party.		
Poli	tical A	ction Committee (PAC):			
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:		
	Terres	Corporation Corporation w/o Capital Stock	Labor Organization		
		Membership Organization Trade Association	Cooperative		
		In addition, this committee is a Lobbyist/Registrant PAC.	Обороганто		
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate se	egregated fund or party		
(-)		This committee supports/opposes more than one rederal candidate, and is NO1 a separate segregated fund or party militee. (i.e., nonconnected committee)			
		In addition, thie committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Join	t Func	Iraising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political		
Committees Participating in Joint Fundraiser					
	00				
	1.				
	2.	FEC ID number C			
	3.	FEC ID number			
	4.				

	FEC Form 1 (Revised frite or Type Committee Name	<u></u>	Page 3
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership	PAC Sponsor
ı			
 	1 1 1 1 1 1		
-	Mailing Address		
		CITY STATE ZI	P CODE
	Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
7.	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in posse	ssion of committee
	Full Name	SISIOIN VARGHESE	
	Mailing Address	12,077,2 N WILLIAM ANE	
		LINCOLNSHIRE IL 160,06	<u> </u>
	Title or Position	CITY STATE ZI	PCODE
	SECRET FRANKY	Telephone number 8471-56	11-18,40,2
 8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
	Full Name of Treasurer	N , C,H,A,U,D,H,U,R,I, , , , , , , , , , , , , , , , , ,	
	Mailing Address	18 EAST RANDOLPH ST UNIT 2105	<u>' </u>
		CITY STATE ZIF	CODE
	Title or Position [T,R,E,A,S,V,R,E,R,	Telephone number 3,17,1-9,2	5-3142

I

FEC Form 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent SEAN CHAVDHULL	
Mailing Address 8 E RANDULPH ST U	JN, 1,T, 21,0,5
CHICAGG CITY	
Title or Position TIRIEIAISIURERIII Telepho	one number 3172-9251-3142
 Banks or Other Depositories: List all banks or other depositories in which the esafety deposit boxes or maintains funds. 	committee deposits funds, holds accounts, rents
Name of Bank, Depository, etc.	
NATIONAL REPUBLIC BAN	N.K. O.F. C.H.I.C.A.G.O.
Mailing Address ZGIS N DEUON AUE	
C. H. I. C. A. G. U.	1 EL 6.0.659-
CITY	STATE ZIP CODE
Name of Bank, Depository, etc.	
1	
Mailing Address	
<u> </u>	
CITY	STATE ZIP CODE

i	~	٦
		_
	•	٠,
į	M 102	
ĺ		ľ
	٠,	j
ì	X)
Ì)
	Ą	
١	=)
	٩	J
		ĺ

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt** Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):